

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET
NUMBER
PHNL030695 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application

Serial No _____

on _____

and was amended

on _____

☒ was filed as PCT international application

Number PCT/IB2004/050910

on 15 June 2004

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.




I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03101810.4	19 June 2003	YES

U.S. DEPARTMENT OF COMMERCE –Patent and Trademarks Office
(July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHNL030695 US	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32, 266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222	
201	FULL NAME OF INVENTOR	FAMILY NAME KRUISKAMP	FIRST GIVEN NAME Marinus	SECOND GIVEN NAME Johan	
	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands	
202	FULL NAME OF INVENTOR	FAMILY NAME PRINS	FIRST GIVEN NAME Willem	SECOND GIVEN NAME Marten	
	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands	
203	FULL NAME OF INVENTOR	FAMILY NAME OOSTERWAAL	FIRST GIVEN NAME Lambertus	SECOND GIVEN NAME Johannes Maria Petrus	
	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 	
DATE 03 January 2005		DATE 03 January 2005		DATE 03 January 2005	

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IAP20 Request Form 14 DEC 2005

PTO/SB/122 (04-05)

Approved for use through 07/31/2006. OMB 0651-0035

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CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number

unknown
10/560871

Filing Date

herewith

First Named Inventor

Marinus J. KRUISKAMP

Art Unit

unknown

Examiner Name

unknown

Attorney Docket Number

PHNL030695US

Please change the Correspondence Address for the above-identified patent application to:

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I am the:

☐

Applicant/Inventor

☐

Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒

Attorney or agent of record. Registration Number 48,979

☐

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature


Typed or Printed
Name

Thomas M. Lundin

Date December 14, 2005

Telephone

440-483-4281

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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